

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	70205	6-2-00
O.I.P.E. CLASSIFIER	RSD		6/11/00
FORMALITY REVIEW	DMIL	091609	8/16/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	10-2-4
Initial	6-12-1
1	6-12-2
2	6-12-2
3	6-12-2
4	6-12-2
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7	6-12-2
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Claim	Date
Final	51
Original	52
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Claim	Date
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Original	102
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If more than 150 claims or 10 actions
staple additional sheet here

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